ATTORNEY'S DOCKET NUMBER PHARMA-131

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

	plural names are listed below) of	and sole inventor (if only one name is lis the subject matter which is claimed and f	ted below) or an original, first for which a patent is sought on	and joint inventor (if the invention entitled:
		TREATMENT OF BONE DI	SEASES	
	the specification of which (check	only one item below):		
	is attached hereto.	•		
1	TPE was filed as United Sta	ates application		
<b>/</b> `	Serial No. <u>09/891,206</u>			
_	NOV 1 6 7001 E on June 26, 2001			
37	and was amended			
	on (if applicable	<b>:)</b> .		
	was filed as PCT inten	national application		
	Number			
	on,			
	and was amended unde	r PCT Article 19		
	on (if applicable	).		
	I hereby state that I have reviewe amended by any amendment referr	d and understand the contents of the abored to above.	ove-identified specification, inc	luding the claims, as
	continuation-in-part applications, if	e information which is material to patent naterial information which became availab iling date of the continuation-in-part app	the between the filing data of the	§ 1.56, including for e prior application and
	designating at least one country of application(s) for patent or inventor	der Title 35, United States Code, §119 of plication(s) for patent or inventor's certificate than the United States of America lister's certificate or any PCT international apply me on the same subject matter having a	cate or 365(a) of any PCT intered below and have also identify	national application(s) ed below any foreign
	PRIOR U.S. PROVISIONAL AND FOREIC	GN/PCT APPLICATION(S) AND ANY PRIC		C. 119:
-	(if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
}	Great Britain	0015745.3	27 JUNE 00	⊠ YES □ NO
L			7	□ VES □ NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); and Jonathan G. Brown (47,451) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: Customer No. 23599

Telephone No. 703/243-6333 Direct Telephone Calls to:

YES

YES

□ NO

□ NO

Anthony J. Zelano

23599

PATENT TRADEMARK OFFICE



# Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHARMA-131

	· <del>, , </del>			
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR	ATHERTON	Nigel	D.
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	CITIZENSHIP	HAMPSHIRE		GREAT BRITAIN
		STREET	GREAT BRITAIN	
1	POST OFFICE ADDRESS	Hampshire International Business	CITY	STATE & ZIP CODE/COUNTRY
	i Donass	Park, Chineham, Basingstoke,	HAMPSHIRE	RG24 8EP, GREAT BRITAIN
-	<del> </del>	<del></del>		
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	1	TOTTEN	Joseph	w.
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2	CITIZENSHIP	HAMPSHIRE	GREAT BRITAIN	GREAT BRITAIN
1	POST OFFICE	STREET	CITY	· · · · · · · · · · · · · · · · · · ·
1	ADDRESS	Hampshire International Business	HAMPSHIRE	STATE & ZIP CODE/COUNTRY RG24 8EP, GREAT BRITAIN
1		Park, Chineham, Basingstoke,		RO24 BEF, GREAT BRITAIN
<u> </u>	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	Process of the second
١.	OF INVENTOR	GAITONDE	Michael	SECOND GIVEN NAME D.
2				D
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
3	CITIZENSIIII	BINNINGEN	SWITZERLAND	SWITZERLAND GREAT
l	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Leinigrubenweg 10	BINNINGEN	CH-4102, SWITZERLAND
	FULL NAME	FAMILY NAME	FIDOT CHIENANA	
	OF INVENTOR	Transit Ivanis	FIRST GIVEN NAME	SECOND GIVEN NAME
2				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
4	CITIZENSHIP		·	·
	POST OFFICE	STREET	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS			
	FILL 314340	FAMILY NAME		
	FULL NAME OF INVENTOR	PARILI NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	-			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	CITIZENSHIP			·
	POST OFFICE	STREET	CITY	
	ADDRESS	·	CIT	STATE & ZIP CODE/COUNTRY
ļ	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	CITIZENSHIP			SOUTH OF GITZENSIM
.	POST OFFICE	STREET	CITY	
ŀ	ADDRESS		CITY	STATE & ZIP CODE/COUNTRY
$\dashv$				
	FULL NAME OF INVENTOR	EAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	I. IIIIOR			]
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
7	CITIZENSHIP		,	OSONIKI OF CHIZENSHIP
ŀ	POST OFFICE	STREET	CITY	
- 1	ADDRESS	-	CITY	STATE & ZIP CODE/COUNTRY
L			<u> </u>	



### Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHARMA-131

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	account amount
2	OF INVENTOR		PROT GIVEN NAME	SECOND GIVEN NAME
8	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 9	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
			<u> </u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	S. Nov. 2001	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE

ATTORNEY'S DOCKET NUMBER PHARMA-131

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

#### TREATMENT OF BONE DISEASES

the specification o	f which	(check	only	one	item	below):
---------------------	---------	--------	------	-----	------	---------

is attached hereto.

was filed as United States application

Serial No. 09/891,206

on June 26, 2001

and was amended

on \_\_\_\_ (if applicable).

was filed as PCT international application

Number \_\_\_\_

on \_\_\_\_\_\_,

PRADEN

and was amended under PCT Article 19

on \_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, §119 or 365 (b) of the following United States provisional application(s) and of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL AND FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

(if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Great Britain	0015745.3	27 JUNE 00	YES NO
			☐ YES ☐ NO
			☐ YES ☐ NO
			YES NO
			☐ YES ☐ NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); and Jonathan G. Brown (47,451) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: Customer No. 23599

Telephone No. 703/243-6333

Direct Telephone Calls to: Anthony J. Zelano

23599

PATENT TRADEMARK OFFICE



# Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHARMA-131

	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	,	ATHERTON	Nigel	D.
0	RESIDENCE &	CITY HAMPSHIRE	STATE OR FOREIGN COUNTRY GREAT BRITAIN	COUNTRY OF CITIZENSHIP GREAT BRITAIN
	POST OFFICE ADDRESS	Hampshire International Business Park, Chineham, Basingstoke,	CITY HAMPSHIRE	STATE & ZIP CODE/COUNTRY RG24 8EP, GREAT BRITAIN
2	FULL NAME OF INVENTOR	FAMILY NAME TOTTEN	FIRST GIVEN NAME JOSEPh	SECOND GIVEN NAME W.
0 2	RESIDENCE & CITIZENSHIP	CITY HAMPSHIRE	STATE OR FOREIGN COUNTRY GREAT BRITAIN	COUNTRY OF CITIZENSHIP GREAT BRITAIN
	POST OFFICE ADDRESS	Hampshire International Business Park, Chineham, Basingstoke,	HAMPSHIRE	STATE & ZIP CODE/COUNTRY RG24 8EP, GREAT BRITAIN
2	FULL NAME OF INVENTOR	FAMILY NAME GAITONDE	FIRST GIVEN NAME Michael	SECOND GIVEN NAME D.
3	RESIDENCE & CITIZENSHIP	CITY BINNINGEN	STATE OR FOREIGN COUNTRY SWITZERLAND	COUNTRY OF CITIZENSHIP SWITZERLAND
_	POST OFFICE ADDRESS	Leimgrubenweg 10	BINNINGEN	STATE & ZIP CODE/COUNTRY CH-4102, SWITZERLAND
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 4	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
5	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 6	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
7	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY



## Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHARMA-131

_	1	<del> </del>		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
8	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
			<u> </u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE 191/OCT/OL	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF TOR 202	DATE 19 OCT OI	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE ,